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# The Department of Vermont Health Access Medical Policy

**Subject: Eyeglasses and Vision Care Services** 

Last Review: April 21, 2015 Revision 5: August 28, 2014 Revision 4: March 11, 2013 Revision 3: December 1, 2011 Revision 2: January 10, 2011 Revision 1: July 14, 2009 Original Effective: 2004

# **Description of Service or Procedure**

Eyewear and vision care services are those services requiring the application of theories, principles and procedures related to vision and vision disorders for the purpose of diagnosis and treatment, including lenses, frames, other aids to vision, and therapeutic drugs. The definition is consistent with the federal definition of services found at CFR 440.60(a), 440.120(d), and 441.30.

- Eyewear includes eyeglass frames, lenses, contact lenses and other aids to vision.
- Vision care services include routine eye exams, diagnostic tests and fitting fees.

#### **Disclaimer**

Coverage is limited to that outlined in Medicaid Rule that pertains to the beneficiary's aid category. Prior Authorization (PA) is only valid if the beneficiary is eligible for the applicable item or service on the date of service..

- Coverage of **eyewear** is limited to eligible beneficiaries under the age of 21.
- Vision care services are provided to eligible beneficiaries of any age.

## **Medicaid Rule**

7102.2 Prior Authorization Determination

7103 Medical Necessity

7316 Eyeglasses and Vision Care Services

Medicaid Rules can be found at <a href="http://humanservices.vermont.gov/on-line-rules">http://humanservices.vermont.gov/on-line-rules</a>



# **Coverage Position**

Vision care services and devices may be covered for beneficiaries:

- When the service is prescribed by a licensed medical provider, enrolled in the Vermont Medicaid program, operating within their scope of practice in accordance with Vermont State Practice Act, who is knowledgeable in the use of vision care services and devices and who provides medical care to the beneficiary AND
- When the clinical guidelines below are met.

# **Coverage Guidelines**

Eyeglasses (frames and lenses), are provided by the State of Vermont's sole source contractor, and are covered for beneficiaries under the age of 21.

Lenses may be placed in the beneficiary's own frames if the lenses can be incorporated safely and reasonably into those frames, as determined by the sole source contractor. If there is a medical reason for purchasing frames outside of the contract, the lenses will also need to be authorized for beneficiaries under the age of 21.

# A prior authorization is required for the following:

- Contact lenses for optimum management of ocular conditions such as aphakia, keratinous, or corneal transplant. A single lens and not a pair are considered one unit.
- Some special lenses (Note: the prism lenses feature does not require a prior authorization)
- Progressive lenses will only be covered for a documented diagnosis of Presbyopia
- Photosensitive lenses
- More than one comprehensive eye exam and one intermediate eye within the 24 month limit or more than two intermediate eye exams within a two year period
- Replacement of frames or lenses, other than those that are broken or lost, within a 24 month period for beneficiaries from the age of 6 to under the age 21 and within a 12 month period for those beneficiaries under the age of 6.

# Clinical guidelines for repeat service or procedure\_

Earlier replacement is limited to the following circumstances.

- When eyeglasses (frames or lenses) have been lost, broken beyond repair, or scratched to the extent that visual acuity is compromised. Dispensing providers will make the clinical determination, and document reason, in regards to eyeglasses (frames or lenses) being broken beyond repair or visual acuity being compromised.
- When a change of at least one-half diopter in lens strength is documented in a single vision field (i.e. sphere or cylinder) by the dispensing provider.

## Type of service or procedure not covered (this list may not be all inclusive)

- Eyeglasses (frames and/or lenses) purchased outside of the department's sole-source contract are not covered.
- Transition lenses © Gas permeable bifocal contact lens

## References

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- Medical or other remedial care provider by licensed practitioners 440.60 (a)
- Prescribed drugs, dentures, prosthetic devices, and eyeglasses 440.120 (d)
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Photochromic lenses explained. (2011). *Eyekit*. Retrieved March 16, 2015, from: http://www.eyekit.co/information/lenses/what-are-photochromic-lenses.html

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